

**RECEIPT OF PAYMENT / RELEASE OF CLAIMS**  
**FOR BACK WAGES**

REFERENCE: Contract \_\_\_\_\_

I \_\_\_\_\_, hereby acknowledge receipt of payment  
(typed or printed name)

from \_\_\_\_\_ as shown below:  
(Name of Contractor)

GROSS AMOUNT RECEIVED \$ \_\_\_\_\_

LESS LEGAL DEDUCTIONS: \$ \_\_\_\_\_

NET AMOUNT RECEIVED: \$ \_\_\_\_\_

The above represents all unpaid (back) wages due me and I hereby fully release all claims for back payment for the period between

\_\_\_\_\_ and \_\_\_\_\_

\_\_\_\_\_  
(Signature of Employee)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Social Security Number)

\_\_\_\_\_  
(Street or P O Box Number)

\_\_\_\_\_  
(City, State, Zip+4)

**EMPLOYER'S CERTIFICATION**

I hereby certify that I have on this date paid the above-named employee in full covering any unpaid or incorrectly paid wages as stated above.

\_\_\_\_\_  
(Signature of Authorized Representative)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Company Name)

\_\_\_\_\_  
(Title)

**PENALTIES ARE PRESCRIBED FOR FALSE STATEMENTS AND FALSE RECEIPTS.**

**NOTE: A separate, supplemental, certified payroll must be prepared and submitted with this receipt for each pay period affected.**